



#131 Reg for  
refund  
02-21-02

Practitioner's Docket No. BA4-079  
Battelle Memorial Institute

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Tonkyn, Russell, et al

Application No.: 09/960,124                  Group No.: 1754  
Filed: 09/21/01                  Examiner: Unknown  
For: No<sub>x</sub> Reduction Methods & Apparatuses

Assistant Commissioner for Patents  
Washington, D.C. 20231

ATTENTION: Refund Section, Accounting Division, Office of Finance

REQUEST FOR REFUND  
(37 C.F.R. 1.28(a))

I. SUBMISSION OF SMALL ENTITY STATEMENT

Attached is a statement claiming small entity status in this application.

II. REFUND REQUEST

This request for refund is made within three months, in accordance with 37 C.F.R. section 1.28, of the date a fee was paid in this application on September 21, 2001, in the amount of \$ 1,186.00.

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CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. section 1.8(a))

I hereby certify that, on the date shown below, this correspondence is being:

MAILING

- deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

FACSIMILE

- transmitted by facsimile to the Patent and Trademark Office.

Signature

Date: \_\_\_\_\_

(type or print name of person certifying)

**III. FEES PAID FOR WHICH REFUND REQUESTED AMOUNT OF REFUND  
REQUESTED**

Filing fee	\$355.00
Independent Claims in excess of three	\$ 40.00
Total Claims in excess of twenty	\$198.00

TOTAL REFUND REQUESTED \$593.00

**IV. MANNER OF REFUND**

Please make refund by crediting Account No. 23-0925.

Date: 21 Dec 2021



James E. Lake  
Registration No. 44,854  
Wells, St. John, et al  
601 W. First Avenue  
Suite 1300  
Spokane, WA 99201  
US-509-624-4276  
Customer No. 021567



PRACTITIONER'S DOCKET NO. BA4-079

**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Tonkyn, Russell, et al

Application No.: 09/960,124  
Filed on: September 21, 2001  
Title: No<sub>x</sub> Reduction Methods & Apparatuses

**STATEMENT CLAIMING SMALL ENTITY STATUS  
(37 CFR 1.27(a)(3)(ii)(C)--NONPROFIT ORGANIZATION**

I hereby state that I am a registered attorney of record appointed in compliance with 37 CFR 1.34(b):

Name of Nonprofit : Battelle Memorial Institute  
Address of Nonprofit : 902 Battelle Boulevard  
P. O. Box 999  
Richland, Washington 99352

**TYPE OF NONPROFIT ORGANIZATION**

Nonprofit Scientific or Educational Under Statute of State of the United States of America.

Name of State: Ohio  
Citation of Statute: Rev. Code of Ohio 1719.01 and 1719.05

I hereby state that the nonprofit organization identified above qualifies as a nonprofit organization, as defined in 37 CFR 1.27(a)(3), for purposes of paying reduced fees to the United States Patent and Trademark Office under Sections 41(a) and (b) of Title 35, United States Code, with regard to the invention described in the application identified above.

I hereby state that rights under contract or law have been conveyed to, and remain with, the nonprofit organization, with regard to the above identified invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 C.F.R. 1.27(a)(1), if that person made the invention, or by any concern that would not qualify as a small business concern under 37 CFR 1.27(a)(2), or a nonprofit organization under 37 CFR 1.27(a)(3).

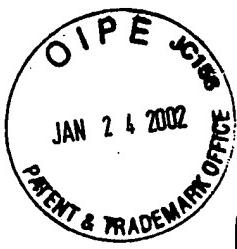
No such person, concern, or organization exists.

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

Date: 21 Dec 2001

Signature

  
James E. Lake  
Reg. No. 44,854  
601 W. First Avenue  
Suite 1300  
Spokane, WA 99201  
USA



Please type a plus sign (+) inside this box →

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### OFFICE OF FINANCE

PTO/SB/21 (6-98)

Approved for use through 09/30/2000. OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

7M2 FEB -4  
Application Number

AM 10: 41  
09/960,124

Filing Date

PATENT &  
OFFICE

TRADEMARK

September 21, 2001

First Named Inventor

Russell Tonkyn

Group Art Unit

1754

Examiner Name

Unknown

Total Number of Pages in This Submission

Attorney Docket Number  
BA4-079

### ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input checked="" type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks Customer No. 021567		
The Commissioner is hereby authorized to charge any additional fees required under 37 C.F.R. § 1.16 and § 1.17 and credit any overpayments to account no. 23-0925.		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	James E. Lake; Reg. No. 44,854; Wells, St. John, et al
Signature	
Date	21 Dec 2001

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 12/21/2001

Typed or printed name

Signature

Date 12/21/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

REF  
Room 304